

The Original LUXATOR® Instructions

The Original LUXATOR® is NOT an elevator and can NOT be used as an elevator. If used as an elevator The Original LUXATOR® will bend and/or break. Broken Luxators® will not be replaced.

Please read these instructions carefully before using The Original LUXATOR®.

- The compact bone is thickest on the buccal side of the first and second molars in the maxilla and should be luxated from the palatal side.
- The compact bone is thickest on the buccal side of the second and third molars in the mandible and should be luxated from the lingual side.
- To minimize the risk of alveolar ridge fractures, the 5mm Luxator® should be used buccally & lingually in molar region.
- The maxillary lateral incisor should be luxated in a palatal direction because of the angle of the root.
- Since most roots are normally curved distally, this should be taken into consideration during extractions.
- Instructions continued on reverse side.

Sharpening The Original LUXATOR®.

- Hold the sharpening stone at one end in your left hand and The Original LUXATOR® in your right hand. Place the concave surface of the tip on the sharpening stone and stroke away from your left hand. Lift the blade after each stroke and replace at the original site. Repeat until the blade is sharp.

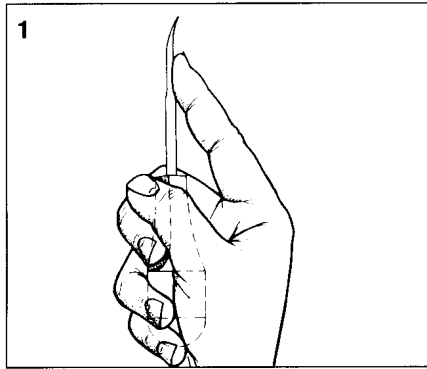
Sterilizing The Original LUXATOR®.

The Original LUXATOR® can be sterilized using the following methods:

- Autoclave at 270° F for 20 minutes (132° C)
- Dry Heat at 356° F for 120 minutes (180° C)
- Chem-Clave according to your Chem-Clave instructions.

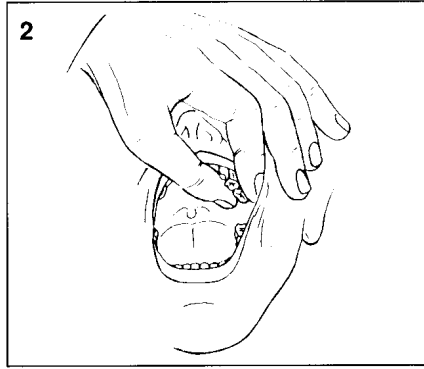
Prod. No.	Description	Use
1L-C	Complete Kit with all 7 Luxators® & Sharp. Stone	Several
1L-K1	Kit with 4 Luxators® (3C, 3S, 5C, 5S, & Sharp. Stone)	Several
1L-2S	2mm Straight Blade Luxator® (Dark Gray Handle)	Apical abd/or Interproximal
1L-3C	3mm Curved Blade Luxator® (Black Handle)	General use / starter
1L-3CA	3mm Contra Angle Blade Luxator® (Blue Handle)	Lingual and/or Distal – Molars
1L-3IC	3mm Inverted Curved Blade Luxator® (Maroon Handle)	General, Lingual and/or Distal
1L-3S	3mm Straight Blade Luxator® (Gray Handle)	Interproximal
1L-5C	5mm Curved Blade Luxator® (Brown Handle)	Large molar roots – general use
1L-5S	5mm Straight Blade Luxator® (Tan Handle)	Interproximal
1L-10	Sharpening Stone	Sharpen the Luxator®

Read instructions on reverse side prior to using The Original LUXATOR®.

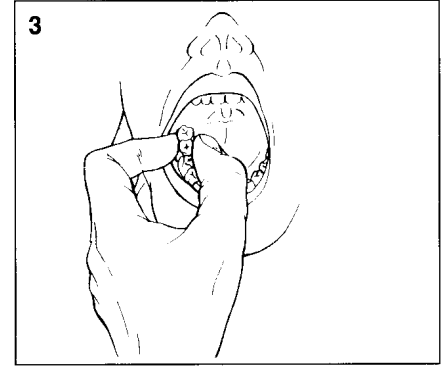


For the best control, hold the Luxator® as illustrated in figure 1.

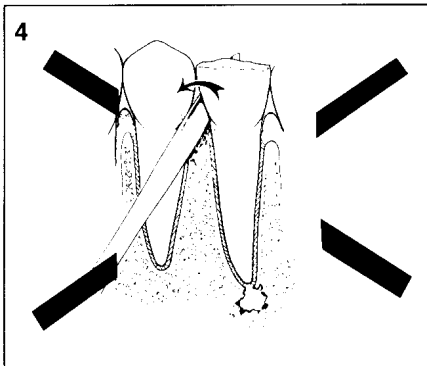
The Luxator® is a surgical instrument and should be used as such. Do not use excessive force.



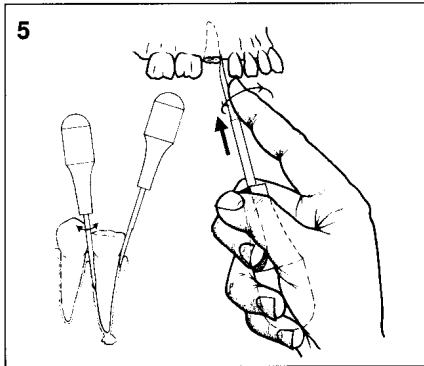
It is extremely important to protect tissues adjacent to the operative site. For increased tactility during luxation, place the thumb & index finger of the left hand around the alveolar ridge, as illustrated in figures 2 and 3.



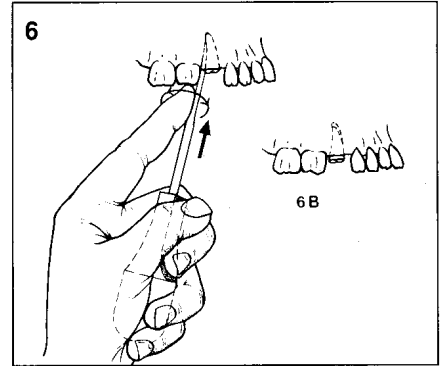
When extracting in the mandible, it is important to stabilize the jaw to prevent excessive pressure on the temporomandibular joint. Use the third, fourth, and fifth fingers of your left hand as illustrated in figure 3.



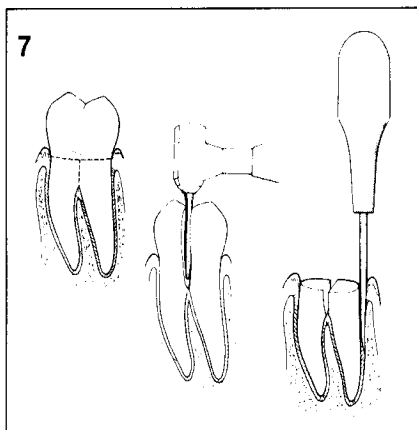
Never use the Luxator® like this or like an elevator! It will bend and/or break.



Place the tip of the Luxator® in the periodontal space on the mesial side of the root. Using relatively strong pressure and small axial rotation (5-10°) insert the Luxator® into the periodontium two-thirds the length of the root, as illustrated in figure 5. Because of the tactile sensation in the thumb and index finger of your left hand, any dislocation of the Luxator® will be evident immediately.



If the root remains firm, the same procedure is repeated on the distal side, as illustrated in figure 6. Good contact with the root surface should be maintained at all times. After mesial and distal luxation, the tooth should be dislodged, as illustrated in figure 6.



Technique for molars.

The Original LUXATOR® is made in Sweden from special steel. Design by Dr. Bo Ericsson.



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